

**Michigan Department of Community Health  
HOME HEALTH FEE SCREEN**

**HOME HEALTH AGENCY VISITS**

<b>DESCRIPTION</b>	<b>REVENUE CODES</b>	<b>HCPCS/ CODES</b>	<b>RATES</b>
Nursing Visit (RN/LPN)	0550, 0551, or 0552 as appropriate	G0154 (HCPCS)	\$ 84.35
<b>Infusion Nurse Visit (first two hours)</b>	<b>0550, 0551, or 0552 as appropriate</b>	<b>99601 (CPT)</b>	<b>\$63.90</b>
<b>Infusion Nurse Visit (each additional hour)</b>	<b>0550, 0551, or 0552 as appropriate</b>	<b>99602 (CPT)</b>	<b>\$31.95</b>
Home Health Aide Visit	0570, 0571, or 0572 as appropriate	G0156 (HCPCS)	\$ 53.88
Physical Therapy Visit	0420, 0421, 0422, or 0424 as appropriate	G0151 (HCPCS)	\$ 81.37
Occupational Therapy Visit-	0430, 0431, 0432, or 0434 as appropriate	G0152 (HCPCS)	\$ 66.03
Speech Therapy Visit- Only covered for children under age 21 through the Children's Special Health Care Services (CSHCS) Program	0440, 0441, 0442, or 0444 as appropriate	G0153 (HCPCS)	\$ 81.37
<b>Blood Lead Follow-Up Nurse Visit</b>	<b>0550, 0551, or 0552 as appropriate</b>	<b>ICD-9-CM diagnosis code 0984</b>	<b>\$84.35</b>

**HOME HEALTH SUPPLIES - MEDICAL SUPPLY ITEMS  
REVENUE CODE 0270 - Miscellaneous Items**

<b>DESCRIPTION</b>	<b>HCPCS CODE</b>	<b>QUANTITY PER MONTH</b>	<b>RATE</b>
Alcohol or peroxide, per pint	A4244	8	\$ 1.04
Betadine or Phiso-Hex solution, per pint	A4246	8	\$ 8.53

**HOME HEALTH MEDICAL SUPPLIES CONTINUED  
Incontinence Appliances and Care Supplies**

<b>DESCRIPTION</b>	<b>HCPCS CODE</b>	<b>QUANTITY PER MONTH</b>	<b>RATE</b>
Insertion tray without drainage bag and without catheter (accessories only)	A4310	2	\$ 4.80
Insertion tray without drainage bag with indwelling catheter, Foley type, two-way latex with coating	A4311	2	\$ 15.34
Insertion tray without drainage bag with indwelling catheter, Foley type, two-way all silicone	A4312	2	\$ 9.56

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<b>DESCRIPTION</b>	<b>HCPCS CODE</b>	<b>QUANTITY PER MONTH</b>	<b>RATE</b>
Insertion tray without drainage bag with indwelling catheter, Foley type, three-way, for continuous irrigation	A4313	2	\$ 22.15
Insertion tray with drainage bag with indwelling catheter, Foley type, two-way latex with coating	A4314	2	\$ 11.29
Insertion tray with drainage bag with indwelling catheter, Foley type, two-way, all silicone	A4315	2	\$ 9.56
Insertion tray with drainage bag with indwelling catheter, Foley type, three-way, for continuous irrigation	A4316	2	\$21.58
Irrigation tray with bulb or piston syringe	A4320	30	\$2.60
Irrigation syringe, bulb or piston, each	A4322	30	\$1.67
Male external catheter, with adhesive coating, each	A4324	96	\$1.06
Male external catheter, with adhesive strip, each	A4325	96	\$1.06
Male external catheter specialty type (e.g., inflatable, faceplate, etc.) each	A4326	30	\$3.66
Female external urinary collection device; pouch, each	A4328	10	\$7.47
Extension drainage tubing, any type, any length, with connector/adaptor, for use with urinary leg bag or urostomy	A4331	4	\$3.16
Urinary catheter anchoring device, adhesive skin attachment, each	A4333	4	\$2.42
Urinary catheter anchoring device, leg strap, each	A4334	6 per 3 months	\$3.33
Indwelling catheter; Foley type, two-way latex with coating	A4338	2	\$19.48
Indwelling catheter, Foley type, two-way, all silicone, each	A4344	5	\$13.33
Intermittent urinary catheter; straight tip, each	A4351	150	\$1.96
Intermittent urinary catheter; curved tip, each	A4352	150	\$2.44

**External Urinary Supplies**

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<b>Description</b>	<b>HCPCS Code</b>	<b>Quantity per month</b>	<b>Rate</b>
Bedside drainage bag, day or night, with or without anti-reflux device, with or without tube, each	A4357	3	\$5.32
Urinary leg bag; vinyl, with or without tube, each	A4358	10	\$5.46

**Additional Miscellaneous Supplies**

<b>Description</b>	<b>HCPCS Code</b>	<b>Quantity per month</b>	<b>Rate</b>
Non-waterproof tape, per 18 sq. inches	A4450	240	\$.09
Waterproof tape, per 18 sq. inches	A4452	240	\$.36
Disposable underpads, all sizes (e.g., Chux's)	A4554	180	\$0.44
Non sterile gloves, per 100	A4927	2	\$7.50
Sterile gloves, per pair	A4930	200	\$.68

**Supplies for Oxygen and Related Respiratory Equipment**

<b>Description</b>	<b>HCPCS CODE</b>	<b>Quantity per month</b>	<b>Rate</b>
Tracheostomy care kit for established tracheostomy	A4629	30	\$1.55

**Dressings**

<b>Description</b>	<b>HCPCS CODE</b>	<b>Quantity per month</b>	<b>Rate</b>
Alginate dressing, wound cover, pad size 16 sq. in or less, each dressing	A6196	30	\$7.29
Alginate dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in., each dressing	A6197	30	\$16.31
Alginate dressing, wound cover, pad size more than 48 sq. in., each dressing	A6198	30	\$25.32
Alginate dressing, wound filler, per 6 inches	A6199	30	\$5.24

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<b>Description</b>	<b>HCPCS CODE</b>	<b>Quantity per month</b>	<b>Rate</b>
Composite dressing, pad size 16 sq. in. or less, with any size adhesive border, each dressing	A6203	30	\$3.32
Composite dressing, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	A6204	30	\$6.18
Composite dressing, pad size more than 48 sq. in with any size adhesive border, each dressing	A6205	30	\$9.04
Contact layer, 16 sq. in. or less, each dressing	A6206	30	\$5.20
Contact layer, more than 16 sq. in. but less or equal to 48 sq. in., each dressing	A6207	30	\$7.28
Contact layer, more than 48 sq. in., each dressing	A6208	30	\$9.36
Foam dressing, wound cover, pad size 16 sq. in. or less, without adhesive border, each dressing	A6209	30	\$7.43
Foam dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in. without adhesive border each dressing.	A6210	30	\$19.76
Foam dressing, wound cover, pad size more than 48 sq. in., without adhesive border, each dressing	A6211	30	\$29.13
Foam dressing, wound cover, pad size 16 sq. in. or less, with any size adhesive border, each dressing	A6212	30	\$9.62
Foam dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in. with any size adhesive border, each dressing	A6213	30	\$9.93
Foam dressing, wound cover, pad size more than 48 sq. in., with any size adhesive border, each dressing	A6214	30	\$10.21
Foam dressing, wound filler, per gram	A6215	240	\$0.25
Gauze, non-impregnated, non-sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	A6216	200	\$0.08
Gauze, non –impregnated, non-sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in. without adhesive border, each dressing	A6217	200	\$0.10
Gauze, non-impregnated, non-sterile, pad size more than 48 sq. in., without adhesive border, each dressing	A6218	200	\$0.25

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<b>Description</b>	<b>HCPCS CODE</b>	<b>Quantity per month</b>	<b>Rate</b>
Gauze, non-impregnated, pad size 16 sq. in. or less, with any size adhesive border, each dressing	A6219	200	\$0.95
Gauze, non-impregnated, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	A6220	200	\$2.56
Gauze, non-impregnated, pad size more than 48 sq. in., with any size adhesive border, each dressing	A6221	200	\$4.17
Gauze, impregnated with other than water, normal saline, or hydrogel, pad size 16 sq. in. or less, without adhesive border, each dressing	A6222	200	\$2.11
Gauze, impregnated with other than water, normal saline or hydrogel, pad size more than 16 sq. in., but less than or equal to 48 sq. in., without adhesive border, each dressing	A6223	200	\$2.39
Gauze, impregnated with other than water, normal saline or hydrogel, pad size more than 48 sq. in., without adhesive border, each dressing	A6224	200	\$3.58
Hydrocolloid dressing, wound cover, pad size 16 sq. in. or less, without adhesive border, each dressing	A6234	30	\$6.49
Hydrocolloid dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in. without adhesive border, each dressing	A6235	30	\$16.69
Hydrocolloid dressing, wound cover, pad size more than 48 sq. in. without adhesive border, each dressing	A6236	30	\$27.03
Hydrocolloid dressing, wound cover, pad size 16 sq. in. or less, with any size adhesive border, each dressing	A6237	30	\$7.84
Hydrocolloid dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	A6238	30	\$22.61
Hydrocolloid dressing, wound cover, pad size more than 48 sq. in., with any size adhesive border, each dressing	A6239	30	\$37.38
Hydrocolloid dressing, wound filler, paste, per fluid ounce	A6240	10	\$4.20

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<b>Description</b>	<b>HCPCS CODE</b>	<b>Quantity per month</b>	<b>Rate</b>
Hydrocolloid dressing, wound filler, dry form, per gram	A6241	240	\$0.25
Hydrogel dressing, wound cover, pad size 16 sq. in. or less, without adhesive border, each dressing	A6242	30	\$6.02
Hydrogel dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	A6243	30	\$12.22
Hydrogel dressing wound cover, pad size more than 48 sq. in., without adhesive border, each dressing	A6244	30	\$38.96
Hydrogel dressing, wound cover, pad size 16 sq. in. or less, with any size adhesive border, each dressing	A6245	30	\$7.21
Hydrogel dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in. with any size adhesive border, each dressing	A6246	30	\$9.84
Hydrogel dressing, wound cover, pad size more than 48 sq. in. with any size adhesive border, each dressing	A6247	30	\$23.59
Hydrogel dressing, wound filler, gel, per fluid ounce	A6248	10	\$4.20
Specialty absorptive dressing, wound cover, pad size 16 sq. in. or less, without adhesive border, each dressing	A6251	30	\$1.98
Specialty absorptive dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in. without adhesive border, each dressing	A6252	30	\$3.22
Specialty absorptive dressing, wound cover, pad size more than 48 sq. in. without adhesive border, each dressing	A6253	30	\$6.29
Specialty absorptive dressing, wound cover, pad size 16 sq. in. or less, with any size adhesive border, each dressing	A6254	30	\$1.21
Specialty absorptive dressing, wound cover, pad size more than 16 sq. in. but less than or equal to 48 sq. in. with any size adhesive border, each dressing	A6255	30	\$3.01
Specialty absorptive dressing, wound cover, pad size more than 48 sq. in. with any size adhesive border, each dressing	A6256	30	\$4.80

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<b>Description</b>	<b>HCPSC CODE</b>	<b>Quantity per month</b>	<b>Rate</b>
Transparent film, 16 sq. in. or less, each dressing	A6257	30	\$1.52
Transparent film, more than 16 sq. in. but less than or equal to 48 sq. in. each dressing	A6258	30	\$4.26
Transparent film, more than 48 sq. in. each dressing	A6259	30	\$10.85
Gauze, impregnated, other than water or normal saline, any width, per linear yard	A6266	30	\$1.22
Gauze, non-impregnated, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	A6402	200	\$0.12
Gauze, non-impregnated, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	A6403	200	\$0.43
Gauze, non-impregnated, sterile, pad size more than 48 sq. in. without adhesive border, each dressing	A6404	200	\$0.73
Pad bandage, non-elastic, non-woven/non-knitted, $\geq 3 < 5$ inches wide per roll	A6421	4	\$1.42
Conform bandage, non-elastic, knitted/woven, non-sterile, width $\geq 3 < 5$ inches wide per roll	A6422	36	\$0.68
Conform bandage, non-elastic, knitted/woven, non-sterile, width $\geq 5$ inches wide per roll	A6424	36	\$1.15
Conform bandage, non-elastic, knitted/woven, sterile $\geq 3 < 5$ inches wide per roll	A6426	36	\$1.22
Conform bandage, non-elastic, knitted/woven, sterile $\geq 5$ inches wide per roll.	A6428	36	\$1.65
Light comp bandage, elastic, knitted/woven, $\geq 3 < 5$ inches, wide per roll	A6430	4	\$1.19
Light comp bandage, elastic knitted/woven $\geq 5$ inches wide per roll	A6432	4	\$1.19
Mod comp bandage, elastic, knitted/woven, $\geq 3 < 5$ inches wide per roll	A6434	4	\$1.19

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